## Utah High School Rodeo Assocation

## **MEMBERSHIP APPLICATION**



Comple	te ALL DIAIRS and	a signatures and have	ioiiii iiotaiized	Notice / 1000 canadro
Full Name	E-Mail			
Address				
ather Name	2	Мс	ther Name	
Date Of Birth		Phone(Contestant)	1	
Gender	Male Female	Phone(Parent	;)	
AGE G	irade SCHOOL		Club	
grade poi	int average with no m tact the UHSRA state	nore than one F, as well as be	Association's grades and eing in good standing wi are conduct problems th at any time during the s	conduct qualifications of a 2.0- th our school. I am aware that I at should prohibit this student chool year.
Media Release Social Media Release				
hereina (photogr to inspe- electron with use is k	permission to UHSR fter known as the "M raphs and/or video) I ect or approve the fir nic matter that may b them now or in the f known to me or unkr	A and their Sponsors, ledia" to use my image hereby waive any right hished photographs or be used in conjunction future, whether that hown, and I waive any inpensation arising from	nderstands that the UHSRA re not to post online any comm and/or its official representativ hreatening, harassing, and/or reate unauthorized websites a Association name, whether understand that failure to abid members, parent(s) or stud immediate revocation of all the	ship in UHSRA, the undersigned equires students and parents to agree ents about the NHSRA, the UHSRA, wes that are inaccurate, detrimental, derogatory, as well as to agree not to nd social media accounts utilizing the r directly or indirectly. We further de by this agreement by either adult dent member(s) will result in the ne undersigned's adult and student including any points awarded in the rodeo season.
appeare for ent oath dis to hol	ed the above named pa rance in the Utah High sposes and says that: W	School Championship Rodeo'	and applicant who have si 's qualifying rodeos for the for said applicant to partio	gned the foregoing application e state of Utah, who upon their cipate in said rodeos and agree
name permiss	ever by reason of his/he ed applicant, and the ap sion to administer the r	oplicant give the local hospital necessary emergency treatme and hereby release the local h sponsors, organizations or ot	we, the undersigned pare and the physicians on the nt for injuries he/she may ospital and physicians on her persons of all liability.	ents or guardian(s) of the above e medical staff of the hospital incur while participating in the the medical staff, any rodeo
name permiss UHS	ever by reason of his/he ed applicant, and the ap sion to administer the r	oplicant give the local hospital necessary emergency treatme and hereby release the local h sponsors, organizations or ot	we, the undersigned pare and the physicians on the nt for injuries he/she may ospital and physicians on her persons of all liability.	ents or guardian(s) of the above e medical staff of the hospital incur while participating in the the medical staff, any rodeo  e me thisday of
name permiss UHS Father	ever by reason of his/heed applicant, and the apsion to administer the rRA qualifying rodeo(s)	oplicant give the local hospital necessary emergency treatme and hereby release the local h sponsors, organizations or ot  The	we, the undersigned pare and the physicians on the nt for injuries he/she may ospital and physicians on the her persons of all liability.  State of Utah County of	ents or guardian(s) of the above e medical staff of the hospital incur while participating in the the medical staff, any rodeo  e me thisday of

NOTARY